PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2003														
CLAIMS AS FILED - PART I (Column 1) (Column 2)									ENTITY	OR		THAN ENTITY		
T	OTAL CLAIMS	•	112	10				RATE	FEE	٦	RATE	FEE		
F	OR		NUMBER	NUMBER FILED		NUMBER EXTRA		BASIC FE			BASIC FEE	+		
T	OTAL CHARGE	ABLE CLAIMS	Vminus 20=					X\$ 9=		7	V210			
IN	DEPENDENT C	CLAIMS	minus 3 =		•			 	-	JOR				
м	ULTIPLE DEPE	NDENT CLAIM I	1		l			X43=	129.	OR	X86=			
* If the difference in column 1 is less than zero, enter "0" in column 2								+145=		OR	+290=			
, I		•	TOTAL	814	OR	· TOTAL								
	CLAIMS AS AMENDED - PART II								OTHER THAN					
_	1	(Column 1)	(Column 2) (Column 3			(Column 3)	'n	SMALL	ENTITY	OR	SMALL			
AMENDMENT A	2/24/04	REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 12	Minus	- 20	<i>y</i>	= Ø	ł	X\$ 9=		OR	X\$18=			
	Independent			(Z	2 .	= 8		X43=	IX	OR	X86=			
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Ī	+145=		OR	+290=			
								TOTAL			TOTAL			
	1/18/07	(Column 1)		(Colum	in 2)	(Column 3)	_	VDDIT. FEE		٠ - ا	ADDIT. FEE			
AMENDMENT B	2/26/07	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	• 12	Minus	- 2	0	= 8	Ī	X\$ 9=	1	OR	X\$18=			
	Independent	* 4	Minus	*** (0	= 8	Ī	X43= ·	X	OR	X86=	¥ ý		
	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDENT	CLAIM			+145=		OR	+290=			
										ОŔ,	TOTAL ADDIT. FEE			
(Column 1) (Column 2) (Column 3)														
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=	Γ	X\$ 9=		OR	X\$18=			
	Independent	*	Minus	***		=	1			.				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	X43=		OR	X86=			
• 4	I the eather in action							+145=		OR	+290=	·		
1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***OFTAL ADDIT. FEE													
	The "Highest Num	ber Previously Pai	d For (Total o	Independen	it) is the	highest number	foun	d in the ap	oropriate box	in colu	ımn 1.	ł		